



SEATTLE
PUBLIC
SCHOOLS

SEATTLE PUBLIC SCHOOL
HIGH SCHOOL PHYSICAL EDUCATION (PE)
WAIVER REQUEST FORM

PE Waivers will be granted for only ONE Semester at a time.

The following categories qualify as allowable reasons for the administrator/designee to consider waiving PE.

- 1. Physical Disability HPE8203 - Attach verification from doctor or health care professional indicating that participation in a PE class will be detrimental to student's health.
- 2. Religious Belief HPE8204 - The student's religion stipulates against participation in physical education. Verification from student's religious leader is required.
- 3. Directed Athletics HPE8205 - Participation in Seattle School District extra-curricular athletic programs requires a coach's verification. Participation in community-based organized athletics requires a weekly log documenting a minimum of 80 hours (during the semester that the student requests the waiver- summers do not count) of regular workouts, practices, and competitions. Parent/Guardian and the coach's verification are required.
- 4. Military Science HPE8206 - Attach proof of enrollment in a Seattle Public Schools' military science class.
- 5. Employment HPE8207 - Student must work to assist family or student is currently self-supporting. Attach verification from employer.
- 6. Other Good Cause HPE8208 - A student taking a full academic course load each semester (no teacher or office assistant) may qualify for a waiver. Include a copy of the current class schedule and transcript. *The transcript must show five semesters of coursework. Students may submit waivers for this reason beginning the second semester of their junior year.
- 7. IEP HPE8209

Name: _____ Student ID #: _____ Class of: _____

Waiver Category #: _____ Athletic Program Participated in: _____ Semester ending: _____

Note of explanation:

(Teacher/Coach Signature)

(Parent/Guardian Signature)

RETURN THIS FORM TO THE COUNSELING OFFICE

Office Use Only		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____	_____
	Administrator/Designee Signature	Date
	_____	_____
	Entered By Data Registration Specialist	Date

